Application Data Sheet

Application Information

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD_R?:: None

Number of CD disks:: 0

Number of copies of CDs:: 0

Sequence Submission:: No

Computer Readable Form (CRF)?:: No

Title:: NOVEL HERBAL FORMULATION AS BRAIN TONIC

Attorney Docket Number:: 11378.59USW1

Request For Early Publication:: No

Request For Non-Publication:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 0

Small Entity:: No

Latin Name::

Variety Denomination Name::

Petition Included:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type::

Inventor

Primary Citizenship Country::

India

Status::

Full Capacity

Given Name::

Palpu

Middle Name::

Family Name::

PUSHPANGADAN

Name Suffix::

City of Residence::

Uttar Pradesh

State or Province of Residence::

Country of Residence::

India

Street of mailing address::

National Botanical Research Institute, Lucknow

City of mailing address::

Uttar Pradesh

State or Province of mailing address::

Country of mailing address::

India.

Postal or Zip Code of mailing address:: 226 001

Applicant Information

Applicant Authority Type::

Inventor

Primary Citizenship Country::

India

Status::

Full Capacity

Given Name::

Chandana

Middle Name::

Venkateswara

Family Name::

RAO

Name Suffix::

City of Residence::

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State or Province of Residence::

Country of Residence::

India

Street of mailing address::

National Botanical Research Institute, Lucknow

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03/26/04

City of mailing address::

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State or Province of mailing address::

Country of mailing address::

India

Postal or Zip Code of mailing address:: 226 001

Applicant Information

Applicant Authority Type::

Inventor

Primary Citizenship Country::

India

Status::

Full Capacity

Given Name::

Ramaswami

Middle Name::

Family Name::

KARTIK

Name Suffix::

City of Residence::

Uttar Pradesh

State or Province of Residence::

Country of Residence::

India

Street of mailing address::

National Botanical Research Institute, Lucknow

City of mailing address::

Uttar Pradesh

State or Province of mailing address::

Country of mailing address::

India

Postal or Zip Code of mailing address:: 226 001

Applicant Information

Applicant Authority Type::

Inventor

Primary Citizenship Country::

India

Status::

Full Capacity

Given Name::

Shanta

Middle Name::

Family Name::

MEHROTRA

Initial

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Name Suffix::

City of Residence::

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State or Province of Residence::

Country of Residence::

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Street of mailing address::

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State or Province of mailing address::

Country of mailing address::

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Postal or Zip Code of mailing address:: 226 001

Applicant Information

Applicant Authority Type::

Inventor

Primary Citizenship Country::

India

Status::

Full Capacity

Given Name::

Ray

Middle Name::

Kumar

Family Name::

GOEL

Name Suffix::

City of Residence::

Uttar Pradesh

State or Province of Residence::

Country of Residence::

India

Street of mailing address::

Banaras Hindu University, Varanasi (Banaras)

City of mailing address::

Uttar Pradesh

State or Province of mailing address::

Country of mailing address::

India

Postal or Zip Code of mailing address:: 221 005

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: India

Status:: Full Capacity

Given Name:: Satyabrata

Middle Name::

Family Name:: ACHARYA

Name Suffix::

City of Residence:: Uttar Pradesh

State or Province of Residence::

Country of Residence:: India

Street of mailing address:: Banaras Hindu University, Varanasi (Banaras)

City of mailing address:: Uttar Pradesh

State or Province of mailing address::

Country of mailing address:: India

Postal or Zip Code of mailing address:: 221 005

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: India

Status:: Full Capacity

Given Name:: Madhavan

Middle Name::

Family Name:: SOMANATHAN

Name Suffix::

City of Residence:: Kerala

State or Province of Residence::

Country of Residence:: India

Street of mailing address:: Munnar P.O.

Initial 03/26/04

City of mailing address::

Kerala

State or Province of mailing address::

Country of mailing address::

India

Postal or Zip Code of mailing address:: 685 612

Correspondence Information

Correspondence Customer Number::

23552

Representative Information

Representative Customer Number::	23552

Domestic Priority Information

Application::	Continuation Type::	Parent Application::	Parent Filing Date::
this application	Continuation of	PCT/IB03/06206	12/26/03

Assignee Information

Assignee Name::

COUNCIL OF SCIENTIFIC AND INDUSTRIAL

RESEARCH

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